

INDEX NO. L &amp; T;

COURT DATE:

COUNTY PART: ROOM: TIME:

Attorneys: Roberts and Roberts, Esq. Ph: 212-226-4925  
 Address: 401 Broadway, Suite 1902 New York, NY 10013

File No.:

QUO VADIS, INC. PROFIT SHARING TRUST  
 -against-  
 WILLIAM F. SCHIEBEL

Petitioner

Respondent

STATE OF MAINE, COUNTY OF YORK, ss.

*Dep David Libbitt* being duly sworn, deposes and says that deponent is not a party to this proceeding, is over the age of 18 years and resides in the State of Maine. That on May 14<sup>th</sup>, 2008 at 7:30 a.m. deponent served the within SUMMONS AND COMPLAINT on WILLIAM F. SCHIEBEL, Respondent therein named at 17 River Rock Rd. Lunkensunk Me 04043

#1 INDIVIDUAL

☒

Deponent served the legal paper(s) noted above at the above address by delivering a true copy of each to said respondent personally. Deponent knew the person so served to be the person described as said Respondent above. ☐ (S)He identified (her) him as such.

#2 CORPORATION

☐

By delivering a true copy thereof personally to \_\_\_\_\_ deponent knew said corporation so served to be the corporation so served to be the corporation described therein as tenant and knew said individual to be the \_\_\_\_\_ thereof.

#3 AFFIXING TO DOOR

☐

The respondent(s) were served by affixing separate true copies for each respondent, to the door of the premises sought to be recovered. At the time of said service, deponent rang the bell and/or knocked on the door but received no reply. After reasonable application, deponent was unable to find the aforementioned respondent(s) or a person of suitable age and discretion who was willing to accept service at the above address, having previously called there:

#4 SUITABLE AGE PERSON

☐

By gaining admittance to said property and delivering to and leaving with \_\_\_\_\_ a true copy thereof for each and every Respondent personally who is a person of suitable age and discretion, who resides or is employed at the premises sought to be recovered.

#5 DESCRIPTION

☐

(use with #1, 2 or 4)

Sex: M Skin: Fair Hair: White Age: 60<sup>s</sup> Height: 6' Weight: 230  
 Other identifying features: \_\_\_\_\_

MAILING

☐

That on \_\_\_\_\_ I mailed true copies of the SUMMONS and COMPLAINT by CERTIFIED and REGULAR MAIL from PORTLAND, MAINE in separate postpaid sealed envelopes (marked personal & confidential addressed to each respondent at the premises sought to be recovered at: \_\_\_\_\_ and deposited these envelopes with a U.S. Postal Clerk within the State of Maine.

Sworn to before me on MAY 14, 2008

*Michael J. Cove*  
 Notary Public / Attorney at Law

By: *Dep David Libbitt*  
 York County Sheriff's Office

MICHAEL J. COVE  
 Notary Public, Maine  
 My Commission Expires March 28, 2010